



FORM

REPURT OF CAMPAIG	A COM MIRO	TICAPPIA	5 EXAPODIL	712F5
CHECK APPROPRIATE BO.	XES-PLEASE	TYPE OR	PRINT IN BL	ACK INK
Quarterly Report:				_
(Check one:)	15] 2 nd	X 3 rd	4'

Final Report (Fund balance on Line E must be \$0)

OCT 15 2021

REEGET WEED

Amendment of the Report Indicated Above CHECK FOR ADDRESS CHANGE Full name and complete mailing address of Political Committee:

State Board of Elections Springfield Office

The state of the s	- CHARLES CHARGE	COMMITTEE ID#			
Friends of Steve Thoren		Committee ID: 35087			
972 W. Highland Ave.	j	3			
Elgin, IL 60123-5260	·	3 .			
E-mail address:	CHECK FOR E-MAIL ADDRESS CHANGE	•			
REPORTING PERIOD CASH AVAILABLE AT BEGINNING	ALL POLITICAL COMMITTE	ES RETURN TO:			
OF REPORTING PERIOD:	STATE BOARD OF ELECTIONS	STATE BOARD OF ELECTIONS			
7-1-21 9-30-21 s	2329 S MacARTHUR BLVD OR SPRINGFIELD, IL 62704-4503	JAMES R THOMPSON CENTER 100 W RANDOLPH, STE 14-100			
FROM DESCRIPTION O, LINE (A)	SI NITO (EES) (C OZ/OT-1303	CHICAGO, IL 60601-3232			
SECTION A — RECEIPTS	SECTION B — EX	SECTION B — EXPENDITURES			
1. Individual Contributions	6. Transfers Out	·			
a. Itemized (from Schedule A): \$(1a	a Itemized (from Schedule B):	\$(6a)			
b. Not-Itemized: \$(1b	b. Not-Itemized:	\$(6b)			
2. Transfers In	7. Loans Made	•			
a. Itemized (from Schedule A): \$(2a	a. Itemized (from Schedule B):	\$(7a)			
b. Not-Itemized: \$(2b)	b. Not-Itemized:	\$(7b)			
3. Loans Received	8. Expenditures				
a. Itemized (from Schedule A): \$(3a		\$(8a)			
b. Not-Itemized \$(3b	b. Not-Itemized	\$(8b)			
4. Other Receipts	9. Independent Expenditures				
a. Itemized (from Schedule A): \$(4a	,				
b. Not-Itemized \$(4b		\$(9b)			
TOTAL RECEIPTS (1a thru 4b) \$(TR		9b)\$(TE)			
***************************************		AID ORIGATIONS			
5. In-Kind Contributions	SECTION C — DEBTS A	ted unpaid debts)			
a. Itemized (from Schedule I); \$(5a	10. a. Itemized (from Schedule C):	\$(10a)			
b. Not-Itemized \$(5b	b. Not-Itemized	\$(10b)			
TOTAL IN-KIND (5a + 5b) \$(TI)	TOTAL DEBTS & OBLIGATIONS	\$			
***************************************	SECTION D — CA	THE RAI ANDE			
Name and address of person submitting this report if other					
than the committee's Chair or Treasurer:	Cash available at beginning of reporting period				
	Total Receipts from Section A (TR	(B)			
	Total cash (A) plus (8)): \$(C)			
	Total Expenditures from Section B (TE	(D)			
	Funds available at close of reporting period (C minus D)	of s 25.45 (E)			
	investments total (if applicable	;): \$(F)			

VERIFICATION: I DECLARE THAT THIS QUARTERLY REPORT OF CAMPAIGN CONTRIBUTIONS AND EXPENDITURES (INCLUDING ACCOMPANYING SCHEDULES AND STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST THE BEST OF MY KNOWLEDGE AND BELIEF IS A TRUE, CORRECT AND COMPLETE REPORT AS REQUIRED BY ARTICLE 9 OF THE ELECTION CODE. I UNDERSTAND THAT WILLFULLY FILING A FALSE OR INCOMPLETE STATEMENT IS SUBJECT TO A CIVIL PENALTY OF AT LEAST \$1001 AND UP TO \$5000.

SIGNATURE OF COMMITTEE TREASURER